

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	METHOD AND MARKER ELEMENT TO DETERMINE THE POSITION OF A DENTAL IMPLANT
Attorney Docket Number::	DE CLERCK3
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	1
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
<b>Applicant Information</b>	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Belgium
Status::	Full Capacity

Given Name:: Rene  
 Middle Name::  
 Family Name:: DE CLERCK  
 Name Suffix::  
 City of Residence:: Tervuren  
 State or Province of Residence::  
 Country of Residence:: Belgium  
 Street of Mailing Address:: Bijlkensveldstraat 4  
 City of Mailing Address:: Tervuren  
 State or Province of Mailing Address::  
 Country of Mailing Address::  
 Postal or Zip Code of Mailing Address::

#### **Correspondence Information**

Correspondence Customer Number:: 001444

#### **Representative Information**

Representative Customer Number:: 001444

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::

This Application

#### **Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
Belgium	PCT/IB2005/050694	02-25-05	
Belgium	2004/0104	02-25-04	Yes

#### **Assignment Information**

Assignee Name:: Rene De Clerck  
 Street of Mailing Address:: Bijlkensveldestraat 4  
 City of Mailing Address:: Tervuren  
 State or Province of Mailing Address::  
 Country of Mailing Address:: Belgium

Postal or Zip Code of Mailing Address:: B-3090